

<b>1. DATE ISSUED:</b> 05/25/2009		<b>2. PROGRAM CFDA:</b> 93.926		DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH RESOURCES AND SERVICES ADMINISTRATION  NOTICE OF GRANT AWARD AUTHORIZATION (Legislation/Regulation) Public Health Service Act, Section 751 Public Health Service Act: Title III, Part D, Section 330H ; 42 U.S.C. 254c-8																																																																							
<b>3. SUPERCEDES AWARD NOTICE dated:</b> except that any additions or restrictions previously imposed remain in effect unless specifically rescinded.																																																																											
<b>4a. AWARD NO.:</b> 2 H49MC00036-09-00		<b>4b. GRANT NO.:</b> H49MC00036				<b>5. FORMER GRANT NO.:</b>																																																																					
<b>6. PROJECT PERIOD:</b> <b>FROM:</b> 06/01/2000 <b>THROUGH:</b> 05/31/2014																																																																											
<b>7. BUDGET PERIOD:</b> <b>FROM:</b> 06/01/2009 <b>THROUGH:</b> 05/31/2010																																																																											
<b>8. TITLE OF PROJECT (OR PROGRAM):</b> HEALTHY START INITIATIVE: ELIMINATING DISPARITIES IN PERINATAL HEALTH																																																																											
<b>9. GRANTEE NAME AND ADDRESS:</b> SHELBY COUNTY GOVERNMENT 160 North Main Street STE 850 Memphis, TN 38103-1812				<b>10. DIRECTOR:</b> (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR) Yvonne Madlock SHELBY COUNTY GOVERNMENT 814 Jefferson Avenue Memphis , TN 38105-5041																																																																							
<b>11. APPROVED BUDGET:</b> (Excludes Direct Assistance) <input checked="" type="checkbox"/> Grant Funds Only <input type="checkbox"/> Total project costs including grant funds and all other financial participation <hr/> <table style="width:100%;"> <tr><td>a. Salaries and Wages:</td><td style="text-align: right;">\$ 443,382.00</td></tr> <tr><td>b. Fringe Benefits:</td><td style="text-align: right;">\$ 115,280.00</td></tr> <tr><td>c. Total Personnel Costs:</td><td style="text-align: right;">\$ 558,662.00</td></tr> <tr><td>d. Consultant Costs:</td><td style="text-align: right;">\$ 0.00</td></tr> <tr><td>e. Equipment:</td><td style="text-align: right;">\$ 0.00</td></tr> <tr><td>f. Supplies:</td><td style="text-align: right;">\$ 26,250.00</td></tr> <tr><td>g. Travel:</td><td style="text-align: right;">\$ 26,647.00</td></tr> <tr><td>h. Construction/Alteration and Renovation:</td><td style="text-align: right;">\$ 0.00</td></tr> <tr><td>i. 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<b>15. PROGRAM INCOME SUBJECT TO 45 CFR Part 74.24 OR 45 CFR 92.25 SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:</b> <b>A=Addition B=Deduction C=Cost Sharing or Matching D=Other</b> <span style="float: right;"><b>[A]</b></span> Estimated Program Income: \$ 0.00																																																																											
<b>16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY HRSA, IS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:</b> <small>a. The grant program legislation cited above. b. The grant program regulation cited above. c. This award notice including terms and conditions, if any, noted below under REMARKS. d. 45 CFR Part 74 or 45 CFR Part 92 as applicable. In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.</small>																																																																											
<b>REMARKS:</b> (Other Terms and Conditions Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No )																																																																											
<i>Electronically signed by Helen Harpold, Grants Management Officer on: 05/25/2009</i>																																																																											
<b>17. OBJ. CLASS:</b> 41.51		<b>18. CRS-EIN:</b> 1626000841A1		<b>19. FUTURE RECOMMENDED FUNDING:</b>																																																																							
<b>FY-CAN</b>	<b>CFDA</b>	<b>DOCUMENT NO.</b>	<b>AMT. FIN. ASST.</b>	<b>AMT. DIR. ASST.</b>	<b>SUBPROGRAM CODE</b>																																																																						
09-3898020	93.926	H49MC00036C0	\$ 601,939.00	\$ 0.00	N/A																																																																						
07-3898020	93.926	H49MC00036C0	\$ 144,895.00	\$ 0.00	N/A																																																																						

## HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NGA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NGA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants.hrsa.gov/webexternal/login.asp> to use the system. Additional help is available online and/or from the HRSA Call Center at 1-877-464-4772.

## Terms and Conditions

Failure to comply with the special remarks and condition(s) may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

### Grant Specific Terms:

1. This Notice of Grant Award provides the offset of an unobligated balance in the amount of \$144,895 from the 06/01/2007-05/31/2008 budget period to the current budget period. Please be advised that if the final resolution of the audit determines that the unobligated balance of Federal Funds is incorrect, HRSA is not obligated to make additional Federal Funds available to cover the shortfall.
2. Healthy Start funds may not be used for entertainment costs. Trips and/or activities for Healthy Start clients must relate to both the goal of reducing infant mortality and the approved project objectives.
3. Fund raising costs are unallowable. Healthy Start funds, e.g., staff salary, contract personnel, consultants or costs for items to be sold or raffled, may not be used for fund raising activities.
4. The replacement of, or significant change in the responsibilities of senior project staff, including the project director, project manager, and chief financial officer, must have prior approval from the Grants Management Officer. The grantee must obtain prior approval from the awarding office for changes in scope, direction, type of service delivery or training, and rebudgeting of Healthy Start funds.
5. Through a learning collaborative model, each Project Director along with other key staff and participants will be required to participate in a meeting scheduled from August 3 – 4, 2009 in the Washington, D.C. area. Each grantee should budget up to five person trips for this meeting. Additionally, a second learning collaborative meeting is tentatively scheduled for May 2010 in the DC area which will require up to five person trips budgeted as well. As stated in the Guidance applicants were to budget for 10 person trips per year. All grantees are to review budgets and if not included in approved budget revise budget to include 10 person trip requirement Please keep these 10 required person trips in mind if there is a need for rebudgeting during this fiscal year.
6. This action reflects a new document number. Please refer to this number when contacting or submitting draw-down requests to the Payment Management System. Reporting on the PMS 272 should reflect this number for all disbursements related to this project period.

### Program Terms:

1. The management Team, including key personnel, must reflect the cultural diversity of the Community to be served.
2. Each project is expected to establish a plan to recover, to the maximum extent feasible, third party revenues to which it is entitled for services provided; garner all other available Federal, state, local, and private funds; and charge beneficiaries according to their ability to pay for services without creating a barrier to those services. Where third-party payors, including Government agencies, are authorized or are under legal obligation to pay all or a portion of charges for health care services, "all such sources must be billed for covered services, and every effort must be made to obtain payment. Each service provider receiving Federal funds, either directly or indirectly, must have a procedure to identify all persons served who are eligible for third-party reimbursement."
3. All MCHB discretionary grant projects are expected to incorporate a carefully designed and well-planned evaluation

protocol capable of demonstrating and documenting measurable progress toward achieving the stated goals. The measurement of progress toward goals should focus on systems, health and performance indicators, rather than solely on the intermediate process measures.

4. In accordance with the requirements of the "Government Performance and Results Act (GPRA) of 1993" (Public Law 103-62), MCHB has established measurable goals for Federal programs that can be reported as part of the budgetary process, thus linking funding decisions with performance. Performance measures and data elements for all MCHB-funded grant programs including Healthy Start have been finalized. As previously communicated all Healthy Start projects are expected to participate in the MCHB reporting requirements system.
5. On a regularly scheduled basis, HRSA grantees are required during their project period to participate in a performance review of their HRSA funded program(s) by a review team from HRSA's Office of Performance Review. If your organization has been selected for a performance review, you will be contacted at least twelve weeks before your performance review begins in order to provide you with additional information about the scope and process for your review, and to schedule the dates for the on-site phase. Upon completion of the performance review, grantees are expected to prepare an Action Plan that identifies key actions to improve program performance as well as addresses any identified program requirement issues.

#### Standard Terms:

1. All discretionary awards issued by HRSA on or after October 1, 2006, are subject to the HHS Grants Policy Statement (HHS GPS) unless otherwise noted in the Notice of Award (NoA). Parts I through III of the HHS GPS are currently available at <http://ftp.hrsa.gov/grants/hhsgrantspolicystatement.pdf> and it is anticipated that Part IV, HRSA program-specific guidance will be available at the website in the near future. In addition, HRSA-specific contacts will be appended to Part III of the GPS which identifies Department-wide points of contact. Please note that the Terms and Conditions explicitly noted in the award and the HHS GPS are in effect. Once available, Part IV, HRSA program-specific guidance will take precedence over Parts I and II in situations where there are conflicting or otherwise inconsistent policies.
2. The HHS Appropriations Act requires that when issuing statements, press releases, requests for proposals, bid solicitations, and other documents describing projects or programs funded in whole or in part with Federal money, all grantees receiving Federal funds, including but not limited to State and local governments, shall clearly state the percentage of the total costs of the program or project which will be financed with Federal money, the dollar amount of Federal funds for the project or program, and percentage and a dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.
3. Recipients and sub-recipients of Federal funds are subject to the strictures of the Medicare and Medicaid anti-kickback statute (42 U.S.C. 1320a - 7b(b) and should be cognizant of the risk of criminal and administrative liability under this statute, specifically under 42 U.S.C. 1320 7b(b) Illegal remunerations which states, in part, that whoever knowingly and willfully:

(A) Solicits or receives (or offers or pays) any remuneration (including kickback, bribe, or rebate) directly or indirectly, overtly or covertly, in cash or in kind, in return for referring (or to induce such person to refer) an individual to a person for the furnishing or arranging for the furnishing of any item or service, OR

(B) In return for purchasing, leasing, ordering, or recommending purchasing, leasing, or ordering, or to purchase, lease, or order, any goods, facility, services, or item

....For which payment may be made in whole or in part under subchapter XIII of this chapter or a State health care program, shall be guilty of a felony and upon conviction thereof, shall be fined not more than \$25,000 or imprisoned for not more than five years, or both.

4. Items that require prior approval from the awarding office as indicated in 45 CFR Part 74.25 [Note: 74.25 (d) HRSA has not waived cost-related or administrative prior approvals for recipients unless specifically stated on this Notice of Grant Award] or 45 CFR Part 92.30 must be submitted in writing to the Grants Management Officer (GMO). Only responses to prior approval requests signed by the GMO are considered valid. Grantees who take action on the basis of responses from other officials do so at their own risk. Such responses will not be considered binding by or upon the HRSA.

In addition to the prior approval requirements identified in Part 74.25, HRSA requires grantees to seek prior approval for significant rebudgeting of project costs. Significant rebudgeting occurs when, under a grant where the Federal share exceeds \$100,000, cumulative transfers among direct cost budget categories for the current budget period exceed 25 percent of the total approved budget (inclusive of direct and indirect costs and Federal funds and required matching or cost sharing) for that budget period or \$250,000, whichever is less. For example, under a grant in which the Federal share for a budget period is \$200,000, if the total approved budget is \$300,000, cumulative changes within that budget period exceeding \$75,000 would require prior approval). For recipients subject to 45 CFR Part 92, this requirement is in lieu of that in 45 CFR 92.30(c)(1)(ii) which permits an agency to require prior approval for specified cumulative transfers within a grantee's approved budget. [Note, even if a grantee's proposed rebudgeting of costs falls below the significant rebudgeting threshold identified above, grantees are still required to request prior approval, if some or all of the rebudgeting reflects either a change in scope, a proposed purchase of a unit of equipment exceeding \$25,000 (if not included in the approved application) or other prior approval action identified in Parts 74.25 and 92.30 unless HRSA has specifically exempted the grantee from the requirement(s).]

5. Payments under this award will be made available through the DHHS Payment Management System (PMS). PMS is administered by the Division of Payment Management, Financial Management Services, Program Support Center, which will forward instructions for obtaining payments. Inquiries regarding payment should be directed to: Payment Management, DHHS, P.O. Box 6021, Rockville, MD 20852, <http://www.dpm.psc.gov/> or Telephone Number: 1-877-614-5533.
6. The DHHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Such reports are kept confidential and callers may decline to give their names if they choose to remain anonymous. Contact: Office of Inspector General, Department of Health and Human Services, Attention: HOTLINE, 330 Independence Avenue Southwest, Cohen Building, Room 5140, Washington, D. C. 20201, Email: [Htips@os.dhhs.gov](mailto:Htips@os.dhhs.gov) or Telephone: 1-800-447-8477 (1-800-HHS-TIPS).
7. Submit audits, if required, in accordance with OMB Circular A-133, to: Federal Audit Clearinghouse Bureau of the Census 1201 East 10th Street Jefferson, IN 47132 PHONE: (310) 457-1551, (800)253-0696 toll free <http://harvester.census.gov/sac/facconta.htm>
8. EO 13166, August 11, 2000, requires recipients receiving Federal financial assistance to take steps to ensure that people with limited English proficiency can meaningfully access health and social services. A program of language assistance should provide for effective communication between the service provider and the person with limited English proficiency to facilitate participation in, and meaningful access to, services. The obligations of recipients are explained on the OCR website at <http://www.hhs.gov/ocr/lep/revisedlep.html>.
9. This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to <http://www.hrsa.gov/grants/trafficking.htm>. If you are unable to access this link, please contact the Grants Management Specialist identified in this Notice of Grant Award to obtain a copy of the Term.

### Reporting Requirements:

1. Due Date: Within 90 days of Budget End Date  
Within 90 days of the end of the budget period, submit to the Program Contact listed below, a progress report containing a schedule of actual revenues and expenditures for the previous budget period. This schedule should itemize expenses by category, in accordance with the categories on the SF 424A, Section B, consistent with the detail provided in the approved grant application. Revenues should be itemized by revenue source. Please detail in each budget category the expenditures made in the category during the budget year.
2. Due Date: Within 90 days of Budget End Date  
The grantee must submit a Financial Status Report within 90 days after the budget period end date. This report should reflect cumulative reporting within the project period and must be submitted using the Electronic Handbook (EHB).

**Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.**

**NGA Email Address(es):**

acwharton@co.shelby.tn.us;ymadlock@co.shelby.tn.us;dmarx@hrsa.gov

Note: NGA emailed to these address(es)

**Contacts:****Program Contact:** For assistance on programmatic issues, please contact Johannie Escarne at:

HRSA/MCHB/DCAFH

5600 Fishers Lane RM 18-12

Rockville, MD 20857-0001

Phone: (301)443-5692

Email: JEscarne@HRSA.GOV

**Division of Grants Management Operations:** For assistance on grants administration issues, please contact Donna

Marx at:

HRSA/OFAM/DGMO/HSB

5600 Fishers Ln RM 11A-02

Rockville, MD 20857-0001

Phone: (301)594-4245

Email: dmarx@hrsa.gov

Fax: (301)443-6686

Responses to reporting requirements, conditions, and requests for post award amendments must be mailed to the attention of the Office of Grants Management contact indicated above. All correspondence should include the Federal grant number (item 4 on the award document) and program title (item 8 on the award document). Failure to follow this guidance will result in a delay in responding to your request.